



Patent  
256/167 (prev. 6646-101NQ)

~~IN THE UNITED STATES PATENT AND TRADEMARK OFFICE~~

**In re the Application of:**

**Ronald A. KATZ**

**Serial No.:** 09/648,691

Filed: August 25, 2000

**For: TELEPHONIC-INTERFACE  
STATISTICAL ANALYSIS SYSTEM**

## Group Art Unit: 2645

Examiner: S. Weaver

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## Technology Center 2600

PRELIMINARY AMENDMENT TRANSMITTAL

Commissioner for Patents  
Washington, D.C. 20231

Sir:

Transmitted herewith is a Preliminary Amendment and Information Disclosure Statement for the above-identified application.

- “Small Entity Status” of this application under 37 CFR §§ 1.9 and 1.27 has been established by a Verified Statement previously submitted.
- A Verified Statement to establish “Small Entity Status” under 37 CFR §§ 1.9 and 1.27 is enclosed.
- Applicant(s) petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(4)] for the total number of months checked below:

CERTIFICATE OF MAILING UNDER 37 CFR 1.8

I hereby certify that this document (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class mail in an envelope addressed to the Commissioner for Patents, Washington, D.C., 20231.

6/21/02

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Laura Harmon

0231. James Hamon

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
1 month	<input type="checkbox"/> \$55.00	<input type="checkbox"/> \$110.00
2 months	<input type="checkbox"/> \$190.00	<input type="checkbox"/> \$390.00
3 months	<input type="checkbox"/> \$435.00	<input type="checkbox"/> \$890.00
4 months	<input type="checkbox"/> \$680.00	<input type="checkbox"/> \$1,390.00

An extension for \_\_\_\_\_ months has already been secured and the fee paid therefor of \_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this Request \_\_\_\_\_.

**NO ADDITIONAL EXTENSION FEE IS REQUIRED.**

**FEES FOR CLAIMS:**

The fees for claims (37 CFR § 1.16(b)-(d)) have been calculated as shown below:

Total Claims	124	-	74	=	50	x	\$18.00	\$900.00
Independent Claims	6	-	4	=	2	x	\$84.00	\$168.00
Multiple Dependent Claims	\$280	(if applicable)				<input type="checkbox"/>		\$0.00
<b>TOTAL OF ABOVE CALCULATIONS</b>								<b>\$1,068.00</b>
Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28. If applicable, Verified Statement must be attached.								<input checked="" type="checkbox"/> \$0.00
<b>TOTAL FEES FOR CLAIMS SUBMITTED HEREWITH</b>								<b>\$1,068.00</b>

A check in the amount of \_\_\_\_\_ is enclosed to cover the above fee(s).

Charge Deposit Account No. **50-1636** in the amount of **\$1,068.00**.

The Commissioner is authorized to charge Deposit Account No. **50-1636** for any fees required under 37 CFR §§ 1.16, 1.17 and 1.445 that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account **50-1636**.

Dated: 6/21/02

9220 Sunset Blvd., Suite 315  
Los Angeles, California 90069  
(310) 247-8191

Respectfully submitted,  
By: Reena Kuyper  
Reena Kuyper  
Registration No. 33,830